



TENNESSEE DEPARTMENT OF CORRECTION
DIVISION OF ADMINISTRATIVE SERVICES
CERTIFICATION DOCUMENTATION

PLEASE ATTACH THIS CERTIFICATE PERMANENTLY TO ALL RECORDS
(U.S. Rev. Statutes, Sec. 906. Attestation by Legal Keeper of Records)

STATE OF TENNESSEE

COUNTY OF Davidson

I, Warren Tate
(Name of Official Custodian)

hereby certify: That I am the

Corr Counselor III
(Official Position)

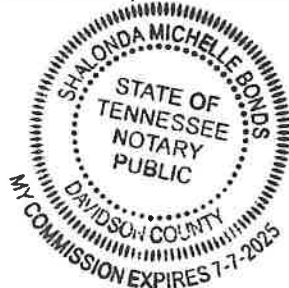
of the Tennessee Department of Correction

situated in the County and State aforesaid; that in my legal custody as such officer are the original files and records of persons heretofore committed to the Tennessee Department of Correction. The attached hereto are copies of the original records, excepting as non-original, however, any third-party documents the Department has received from the original source, which may appear herein, of

Alexander Friedman #135616

a person heretofore committed to the Tennessee Department of Correction and who served a term of imprisonment therein; that I have compared the foregoing and attached copies with their respective originals and third party documents now on file in my office and each thereof contains, and is, a full, true and correct transcript and copy from its said original.

IN WITNESS WHEREOF, I have hereunto set my hand this 07 day of Oct, 20 21



Warren Tate

Signature

Corr Counselor III

Official Title

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Sworn and subscribed to before me this 7 day of October, 20 21.

My Commission Expires: 7-7-2025

[Signature]

Notary Public

Duplicate as Needed

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 3-19-20

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

 CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

AWT

CHIEF COUNSELOR

CHIEF SECURITY/ADMIN LT.

JOB COORDINATOR

MENTAL HEALTH

MEDICAL

WARDEN

(☒) APPROVAL

(☐) DENIAL

DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO MU

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 041720

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

☐ CLOSE ☐ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

AWT

M. Go AWT
JOB COORDINATOR

WARDEN

[Signature]
CHIEF COUNSELOR

[Signature]
MENTAL HEALTH

(☒) APPROVAL

() DENIAL

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
MEDICAL

DATE

04/27/2020

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
 Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
 ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 05/15/20

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

_____ CLOSE _____ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Karp AWT
 AWT

[Signature]
 CHIEF COUNSELOR

[Signature]
 CHIEF SECURITY/ADMIN LT.

[Signature]
 JOB COORDINATOR

[Signature]
 MENTAL HEALTH

[Signature]
 MEDICAL

[Signature]
 WARDEN

(X) APPROVAL

() DENIAL

5/26/2020
 DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO MI

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 06/05/20

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION

☐ PROTECTIVE CUSTODY

☐ CUSTODY LEVEL

☐ CLOSE

☐ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keys AWT 07/07/2020
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

☒ APPROVAL

June 30, 2020
DATE

☐ DENIAL

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO MI

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: [Signature] DATE: 073020

PANEL RECOMMENDATION: ☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

[Signature]
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

7/30/20
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO MI

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 083020

PANEL RECOMMENDATION: ☒

MANDATORY SEGREGATION
PROTECTIVE CUSTODY
CUSTODY LEVEL

 CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keys AWT
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

8/27/2020
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 093020

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

☐ CLOSE ☐ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. G. AWT
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(✓) APPROVAL

() DENIAL

Sept. 30, 2020
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: _____

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: AG. nplu DATE: 10/28/20

PANEL RECOMMENDATION: ☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keys AWT
AWT

Gary Hayes
JOB COORDINATOR

T. G. P.
WARDEN

RECEA
CHIEF COUNSELOR

Rebecca Bullion (CSU)
MENTAL HEALTH

(☒) APPROVAL

() DENIAL

J. M.
CHIEF SECURITY/ADMIN LT.

Melvin Adams RN HSA
MEDICAL

November 05, 2020
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO MI

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: C. Williams DATE: 112820

PANEL RECOMMENDATION: ☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keys AWT
AWT

Acting CC4 Williamson
CHIEF COUNSELOR

Frank H. H. H.
CHIEF SECURITY/ADMIN LT.

Gary H. H.
JOB COORDINATOR

[Signature]
MENTAL HEALTH

Melinda H. H.
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

12/08/2020
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 122920

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION

☐ PROTECTIVE CUSTODY

☐ CUSTODY LEVEL

☐ CLOSE

☐ MEDIUM

REASON: _____

BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

AWT

CHIEF COUNSELOR

CHIEF SECURITY/ADMIN LT.

JOB COORDINATOR

MENTAL HEALTH

MEDICAL

WARDEN

(☒) APPROVAL

(☐) DENIAL

DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO MI

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: C. Wong DATE: 012521

PANEL RECOMMENDATION: ☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keyo AWT
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(X) APPROVAL

() DENIAL

3/10/2021
DATE

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): N/A CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
DEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: SOLIC OF STAFF
UNAUTH FIN OBLIG/TRAN

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is adjusting to the facility and unit without incident and issues. No problems to report.

UNIT COUNSELOR SIGNATURE: _____

DATE: 022521

PANEL RECOMMENDATION: _____

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

_____ CLOSE _____ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keep AWT
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

03/05/2021
DATE



Tennessee Department of Correction
SAFEKEEPER Monthly Assessment Report for Sheriff

Order Basis: _____

Inmates Name: : Friedmann Alexander
Last First Middle

TDOC NO. 135616

DATE OF ARRIVAL IN TDOC: 2/19/2020

TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage

CRIMINAL HISTORY: Att. Rob, Arm Rob with
deadly weapon, assault w/intent

CO-DEFENDANTS: Unknown

DISCIPLINARY ISSUED: None

MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2

INCOMPATIBLES: None STG: None EDUCATION: GED

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S
RECOMMENDATION.

No behavior problems noted or reported by staff in Unit 1 at RMSI.

UNIT COUNSELOR SIGNATURE: _____

DATE: 03/30/21

PANEL RECOMMENDATION:

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

 CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keip
AWT

[Signature]
CHIEF COUNSELOR

D. Dough
CHIEF SECURITY/ADMIN LT.

Denise Douglas
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL Christopher P. Smith, Jr. Eds
Behavioral Health Administrator

3/30/2021
DATE

() DENIAL

CR4168

Duplicate As Needed

RDA####

SAFEKEEPER Monthly Assessment Report

ASSESSMENT: _____

Inmates Name: FRIEDMANN ALEXANDER TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 1/5/1960 TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage CRIMINAL HISTORY: ATT AGG ROB, ROB ARM
HEAD WEAP, ASS W/INT TO M

CO-DEFENDANTS: N/A DISCIPLINARY ISSUED: none since arrival

SAFEKEEPER: Y MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2
ORDER

INCOMPATIBLES: N/A STG: N/A EDUCATION: N/A

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

Inmate is complaining about food and housing in an iron man cell, UM has addressed stating per Commissioner he must be housed there. He has attorney phone calls in UM office when scheduled.

UNIT COUNSELOR SIGNATURE: AR uplice CC3 DATE: 4/20/21

PANEL RECOMMENDATION: X MANDATORY SEGREGATION
PROTECTIVE CUSTODY
CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. K. AWT
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

Gary Hayes
JOB COORDINATOR

[Signature]
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

May 18, 2021
DATE



Order Basis: _____

Inmates Name: : Friedmann Alexander TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage

CRIMINAL HISTORY: Att. Rob, Arm-Rob with
deadly weapon, assault w/intent

CO-DEFENDANTS: Unknown DISCIPLINARY ISSUED: None

MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2

INCOMPATIBLES: None STG: None EDUCATION: GED

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

No behavior problems noted or reported by staff in Unit 1 at RMSI.

UNIT COUNSELOR SIGNATURE:

DATE: 06/29/24

PANEL RECOMMENDATION:

✓ MANDATORY SEGREGATION
PROTECTIVE CUSTODY
CUSTODY LEVEL

CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

AWT M. Kery

Acting CC4 Williamson
CHIEF COUNSELOR

Frank Healey
CHIEF SECURITY/ADMIN LT.

Gary Key
JOB COORDINATOR

Christopher P. Smith, Jr. Eds
Behavioral Health Administrator

Melinda S. BA
MEDICAL

WARDEN

(✓) APPROVAL

DATE June 30, 2021

() DENIAL

CR4168

Duplicate As Needed

RDA####



Tennessee Department of Correction SAFEKEEPER Monthly Assessment Report for Sheriff

Order Basis: _____

Inmates Name: : Friedmann Alexander TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage CRIMINAL HISTORY: Att. Rob, Arm Rob with
deadly weapon, assault w/intent

CO-DEFENDANTS: Unknown DISCIPLINARY ISSUED: None

MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2

INCOMPATIBLES: None STG: None EDUCATION: GED

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

No behavior problems noted or reported by staff in Unit 1 at RMSI.

UNIT COUNSELOR SIGNATURE: _____

DATE: 07/30/20

PANEL RECOMMENDATION:

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

_____ CLOSE _____ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Keys
AWT

[Signature]
CHIEF COUNSELOR

D. Dargatzis
CHIEF SECURITY/ADMIN LT.

Denise Douglas
JOB COORDINATOR

Christopher P. Smith, Jr.
Behavioral Health Administrator
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

() DENIAL

July 30, 2021
DATE

CR4168

Duplicate As Needed

RDA####



Tennessee Department of Correction SAFEKEEPER Monthly Assessment Report for Sheriff

Order Basis: _____

Inmates Name: : Friedmann Alexander TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020 TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage CRIMINAL HISTORY: Att. Rob, Arm Rob with
deadly weapon, assault w/intent

CO-DEFENDANTS: Unknown DISCIPLINARY ISSUED: None

MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2

INCOMPATIBLES: None STG: None EDUCATION: GED

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

No behavior problems noted or reported by staff in Unit 1 at RMSI.

UNIT COUNSELOR SIGNATURE: W. Tate DATE: 08/27/21

PANEL RECOMMENDATION: ☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL CLOSE MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Leyp
AWT

[Signature]
CHIEF COUNSELOR

D. Douglas
CHIEF SECURITY/ADMIN LT

Denise Douglas
JOB COORDINATOR

Christopher P. Smith, Jr. Esq.
Behavioral Health Administrator
MENTAL HEALTH

[Signature]
WARDEN

(✓) APPROVAL

() DENIAL

[Signature]
MEDICAL
8/27/2021
DATE

CR4168

Duplicate As Needed

RDA####



Tennessee Department of Correction
SAFEKEEPER Monthly Assessment Report for Sheriff

Order Basis: _____

Inmates Name: : Friedmann Alexander TDOC NO. 135616
Last First Middle

DATE OF ARRIVAL IN TDOC: 2/19/2020

TDOC LOCATION: RMSI

PENDING OFFENSE(S): Sabotage

CRIMINAL HISTORY: Att. Rob, Arm Rob with
deadly weapon, assault w/intent

CO-DEFENDANTS: Unknown

DISCIPLINARY ISSUED: None

MEDICAL CLASS: B MENTAL HEALTH LEVEL: 2

INCOMPATIBLES: None STG: None EDUCATION: GED

SUMMARY OF INMATE'S BEHAVIOR, ADJUSTMENT, MEDICAL CONDITION, VISITS AND COUNSELOR'S RECOMMENDATION.

No behavior problems noted or reported by staff in Unit 1 at RMSI.

UNIT COUNSELOR SIGNATURE: W. Jato

DATE: 09/28/20

PANEL RECOMMENDATION:

☒ MANDATORY SEGREGATION
☐ PROTECTIVE CUSTODY
☐ CUSTODY LEVEL

☐ CLOSE ☐ MEDIUM

REASON: BASIS OF SAFEKEEPING AND NATURE OF PENDING OFFENSE

M. Karp
AWT

[Signature]
CHIEF COUNSELOR

[Signature]
CHIEF SECURITY/ADMIN LT.

[Signature]
JOB COORDINATOR

D. Kulenovic, PsyD
MENTAL HEALTH

[Signature]
MEDICAL

[Signature]
WARDEN

(☒) APPROVAL

(☐) DENIAL

Oct. 08, 2021
DATE

CR4168

Duplicate As Needed

RDA####